FORM D

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FORM D

Washington, D.C. 20549 SEC Mail Processing Section

AUG 14 2008

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION Washington, DC
SECTION 4(6), AND/OR 110
UNIFORM LIMITED OFFERING EXEMPTION

10/3	3333 <u> </u>			
OMB A	PPROVAL			
OMB Number:	3235-0076			
Expires:	July 31, 2008			
Estimated average burden 16.00				

SEC USE ONLY						
Prefix	1		Serial			
D	ATE REO	CEIVI	ED			

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Name of Offering (  check if this is an amendment and name has changed, and indicate change.)  Blue Ridge Offshore Limited Partnership							
Filing Under (Check box(es) that apply):  Rule 504 Rule 505 Rule 506 Section 4(6) ULOE							
Type of Filing:	ng 🛭 Amendment						
	A. BASIC	IDENTIFICAT	ION DATA				
<b>\</b>	s is an amendment and name has	08058146					
Blue Ridge Offshore Limited Partnership  Address of Executive Offices (Number and Street, City, State, Zip Code)  P.O. Box 309 G.T., Ugland House, S. Church St., George Town, Grand Cayman, Cayman Islands  345-814-5534							
	perations (Number and Street, Cit			Telephone Number (Including Area Code)			
Brief Description of Business	To operate as a special purpose	investment part	nership.				
Type of Business Organization	• • • •			PROCESSED			
☐ corporation	Ilimited partnership, al	ready formed	Othe	er (please specify): AUG 2 6 2008			
business trust	☐ limited partnership, to	be formed		AUG 2 6 2008			
Actual or Estimated Date of Inco	rporation or Organization:	Month 	Year 03	THOMSON REUTERS  Actual Estimated			
Jurisdiction of Incorporation or Organization (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction)  FN.							

# GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Executive Officer □ Director □ General and/or ☐ Promoter ☐ Beneficial Owner Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Blue Ridge Capital Offshore Holdings, LLC **Business or Residence Address** (Number and Street, City, State, Zip Code) P.O. Box 309 G.T., Ugland House, S. Church St., George Town, Grand Cayman, Cayman Islands ☐ Promoter Beneficial Owner ☐ Executive Officer Director Check Box(es) that Apply: Member of the General Partner Full Name (Last name first, if individual) Griffin, John (Number and Street, City, State, Zip Code) **Business or Residence Address** P.O. Box 309 G.T., Ugland House, S. Church St., George Town, Grand Cayman, Cayman Islands Promoter Director General and/or Check Box(es) that Apply: ☐ Beneficial Owner ☐ Executive Officer Managing Partner Full Name (Last name first, if individual) **Business or Residence Address** (Number and Street, City, State, Zip Code) □ Director ☐ General and/or ☐ Promoter ☐ Beneficial Owner Executive Officer Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) **Business or Residence Address** (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) **Business or Residence Address** (Number and Street, City, State, Zip Code) ■ Executive Officer □ Director ☐ General and/or Promoter ☐ Beneficial Owner Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) **Business or Residence Address** (Number and Street, City, State, Zip Code) ☐ Executive Officer General and/or Check Box(es) that Apply: Promoter Beneficial Owner Director Managing Partner Full Name (Last name first, if individual) **Business or Residence Address** (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

			-	<del></del>	B. IN	FORMATI	ON ABOU	T OFFERI	NG				
1.			l, or does th					estors in th	is offering!	·	Yes	No	
2.	2. What is the minimum investment that will be accepted from any individual							<u>\$1,</u> 0 Yes	*000,000				
3.												No □	
4.	Enter th	ie informat	ion request	ed for each	person wh	o has been	or will be	paid or give	en, directly	or indirectl	ly, any com	mission or	similar
	remune	ration for s	olicitation	of purchase	ers in connu	ection with	sales of sec	curities in t	he offering.	If a perso	n to be liste the broker	ed is an ass or dealer - I	ociated f more than
	five (5)	or agent of persons to	be listed a	re associate	d persons	of such a br	roker or dea	a state of saler, you ma	ay set forth	the inform	ation for th	at broker o	r dealer
		ot Applic											
Full Na	me (Last	name first	, if individı	ıal)									
Busines	s or Res	idence Add	lress (Numl	per and Str	eet, City, S	tate, Zip Co	ode)	,					
Name o	f Associ	ated Broke	r or Dealer										
			ed Has Sol or check inc			licit Purcha	asers					☐ All	States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS] [OR]	[MO] [PA]
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[WY]	[PR]
			, if individu									<u> </u>	
Busines	s or Res	idence Ado	lress (Numl	per and Str	eet, City, S	tate, Zip Co	ode)						
Name o	f Associ	ated Broke	r or Dealer					<del></del>					
			ted Has Sol or check in			olicit Purcha	asers					☐ All	States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	[IL]	[IN]	[IA]	[KS]	[KY]	(LA)	[ME]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
			, if individu										
Busines	s or Res	idence Ado	Iress (Num	ber and Str	eet, City, S	tate, Zip C	ode)				<del></del>		
Name o	f Associ	ated Broke	r or Dealer		-		****	-					
			ted Has Sol or check in			olicit Purch	asers		•			□ All	States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[WA]	[WV]	[WI]	[WY]	[PR]
			, if individ										
Busines	s or Res	idence Ado	iress (Num	ber and Str	eet, City, S	tate, Zip C	ode)						
Name o	f Associ	ated Broke	r or Dealer			-					<del></del>		
			ted Has Sol or check in			olicit Purch	asers					□ Al	l States
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
	[IL]	[IN]	(IA)	[KS]	[KY]	[LA]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

١.	Enter the aggregate offering price of securities included in this offering and the	total amount already sold.	Enter "0" if answer
	is "none" or "zero". If the transaction is an exchange offering, check this box [	] and indicate in the colu	mns below the
	amounts of the securities offered for exchange and already exchanged.		

Type of Security	Aggregate Offering Price	Amount Already Sold
Date	<b>\$</b> 0	\$ 0
Equity	\$ 0	\$ 0
[ ] Common [ ] Preferred	\$ 0	\$ 0
Convertible Securities (including warrants)	\$ 0	\$ 0
Partnership Interests	\$3,000,000,000.00	\$1,686,553,291
Other (Specify):	\$ 0	\$ 0
Total	\$3,000,000,000.00	\$1,686,553,291

Answer also in Appendix, Column 3, if filing under ULOE.

2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors		Aggregate Dollar nount of Purchases
Accredited Investors	34	\$1,6	86,553,291
Non-accredited Investors	0	\$	0
Total (for filing under Rule 504 only)	0	\$	0

3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.

Type of Offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$

a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering.
 Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

·			
Transfer Agent's Fees.	[ ]	\$	0
Printing and Engraving Costs	[ x ]	\$	*
Legal Fees	[ x ]	\$	*
Accounting Fees	[ x ]	\$	*
Engineering Fees.	[ ]	\$	0
Sales Commissions (specify finders' fees separately)	[ ]	\$	*
Other Expenses (identify)	[ x ]	\$	*
Total	[ x ]	<b>\$</b> 36	5,000*

<sup>\*</sup>All organizational and offering expenses are estimated not to exceed \$365,000.

	,							
_	C. OFFERING PRICE, NUMBER OF	INVESTORS,	EXPE	NSE	S AND USE OF PR	loc	EED	S
b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."  \$2,999,635,000								2,999,635,000
5.	5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.							
					Payments to Officers, Directors, & Affiliates			Payments to Others
	Salaries		ĺ	]	<u>\$</u>	[	]	\$
	Purchase of real estate		[	1	\$	[	1	<u>\$</u>
	Purchase, rental or leasing and installation of machinery and	equipment	[	]	<u>\$</u>	ĺ	]	<u>\$</u>
	Construction or leasing of plant buildings and facilities	***************************************	{	}	\$	{	}	<u>\$</u>
	Acquisition of other businesses (including the value of securi involved in this offering that may be used in exchange for the securities of another issuer pursuant to a merger)	assets or	[	]	\$	[	]	<u>\$</u>
	Repayment of indebtedness	***************************************	[	]	<b>s</b>	[	]	\$
	Working capital	***************************************	[	]	\$	[	]	\$
	Other (specify): Investments in Blue Ridge Offshore Master	Limited	[ x	: ]	\$2,999,635,000	[	]	\$
	Partnership							
	Column Totals		[ x	: ]	\$2,999,635,000	[	]	\$
	Total Payments Listed (column totals added)	***************************************			[x] <u>\$2</u>	,999	,635	,000
	D. 61	DED AL CION	A TI ID		<del></del>			<del></del>
		DERAL SIGN						
sig	e issuer has duly caused this notice to be signed by the undersignature constitutes an undertaking by the issuer to furnish to the ormation furnished by the issuer to any non-accredited investor	U.S. Securities	and Éx	cha	nge Commission, up			
Iss	uer (Print or Type) Signa	tupe			Date	_1	<u></u>	
	Blue Ridge Offshore Limited Partnership		2			<u> </u>	3]0	<u>{</u>
Na	me of Signer (Print or Type) Title o	of Signer (Print	or Typ	e)			_	
	Richard S. Bello	Managing Dir	ector (	of th	e General Partner			

10711432.1

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 10001.)

ATTENTION

		E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.252(c), (c)	d), (e) or (f) presently subject to any of the disqualification provisions of such r	Yes ule?	No □
	See Appendi	x, Column 5, for state response. Not Applicable		
2.	The undersigned issuer hereby undertakes to fu D (17 CFR 239.500) at such times as required by	arnish to any state administrator of any state in which this notice is filed, a notice by state law. Not Applicable	e on Form	
3.	The undersigned issuer hereby undertakes to fu to offerees. Not Applicable	rnish to the state administrators, upon written request, information furnished by	the issuer	
4.	Limited Offering Exemption (ULOE) of the sta	uer is familiar with the conditions that must be satisfied to be entitled to thate in which this notice is filed and understands that the issuer claiming the available these conditions have been satisfied. Not Applicable		
	e issuer has read this notification and knows th dersigned duly authorized person.	e contents to be true and has duly caused this notice to be signed on its bel	alf by the	
Iss	uer (Print or Type)	Signature		
	Blue Ridge Offshore Limited Partnership	8/13/08		
Na	me (Print or Type)	Title (Print or Type)		
	Richard S. Bello	Managing Director of the General Partner		

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

A	PР	T	ΝI	ħΤ	Y
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Blue Ridge Offshore Limited Partnership										
1	2 3			4				5		
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Not Applicable Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State AL	Yes	No	Partnership Interests \$3,000,000,000	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AK	_							<u> </u>	!	
AZ							!	<u> </u>		
AR								<u> </u>		
CA		X	X	4	\$216,458,131	0	0			
СО					<b>4</b> ,,			 		
CT							0			
DE					····					
DC		Х	Х	ì	\$2,961,441	0	0			
FL		х	Х	3	\$8,469,173	0	0			
GA								,		
HI										
ID										
IL		X	X	1	\$60,989,987	0	0			
IN		Х	Х	1	\$80,593,992	0	0			
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171 1						<u> </u>				

# APPENDIX

Blue Ridge Offshore Limited Partnership									
1	2		3	4				5	
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				Not Applicable Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No	Partnership Interests \$3,000,000,000	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
NE									
NV									
NH									
NJ									
NM						-			
NY		Х	Х	12	\$191,172,394	0	0		
NC		Х	Х	1	\$37,736,924	0	0	 	
ND									
ОН									
OK					1	·			
OR									
PA									
RI		Х	Х	1	\$50,000,000	0	0		
SC									
SD									
TN	<u> </u>	Х	Х	1	\$9,000,000	0	0		
TX		Х	X	3	\$456,883,055	0	0		
UT		 							
VT	<u> </u>								
VA	<u> </u>	Х	X	6	\$572,288,194	0	0		
WA		Х	X	3	\$43,500,000	0	0		1
WV									
WI									
WY	ļ								
PR	<u>                                     </u>					<u></u>			

